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**2004/035** 

AUG 0,7 2006

Signature: Merily Listin
Marilyn Lagios

PTO/SB/17 (12-04v2)
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(Attorney/Agent) 43,146 Telephone (703) 760-7762	Under the Paperwork	Reduction Act of 1995	, no person are	required to	U.S. Pate		emark Office; U.S. Di			
FILING FEES Application Type For Each Collating Filing Date Application Type For Each Collating Filing Date Application Type For Each Collating Filing Date Application Type For Head Source For Each Collating Filing Date For Head Inventor Herbert HEISS Examiner Name Abort T. Chou Afturnity Docket No. 449122048800  METHOD OF PAYMENT (check ell that apply)  Check Credit Card Money Order None Other (please identify): Desposit Account Opposit Account For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)  X Charge fee(s) indicated below on the filing fee  X Credit any overpayments  FEE CALGULATION 1. BASIC FILING FEES FILING FEES FILING FEES SEARCH FEES SEARCH FEES SEARCH FEES SEARCH FEES SEARCH FEES SEARCH FEES Seath Earth Application Type Fee (1) Fee	FI	forthe on 12/08/2004							NE CONTO NUMBE	
For FY 2006	Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).									
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TOTAL AMOUNT OF PAYMENT (\$) 120.00 Attorney Docket No. 449122048800  METHOD OF PAYMENT (check all that apply)  Check Credit Card Money Order None Other (please identify):  Deposit Account Ceposit Account Number, 03-1952 Deposit Account Name Morrison & Foerster LLP  For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)  X Charge fee(s) indicated below Charge fee(s) indicated below Account Name Charge fee(s) indicated below, except for the filling fee (building fee(s) or underpayment of Ee(s) under 37 CFR 1.16 and 1.17  FEE CALCULATION  1. BASIC FILING, SEARCH, AND EXAMINATION FEES  FILING FEES  SEARCH FEES  EXAMINATION FEES  SEARCH FEES  EXAMINATION FEES  Small Entity  Small Entity  Fee (\$) Fe					Examiner Name Albert T. Chou					
METHOD OF PAYMENT (check all that apply)  Check Credit Card Money Order None Other (please identify):  X Deposit Account Opposit account, the Director is hereby authorized to: (check all that apply)  X Charge fee(s) indicated below Charge fee(s) indicated below, except for the filling fee hards fee(s) under 37 CFR 1.16 and 1.17  FEE CALCULATION  1. BASIC FILING, SEARCH, AND EXAMINATION FEES  FILING FEES  FILING FEES  Small Entity Application Type Fee (5) Fee (5) Fee (5) Fee (5) Fee (6) Fee (6) Fees Paid (5)  Plant 200 100 300 150 500 250 200 100  Design 200 100 100 50 50 130 65  Plant 200 100 300 150 160 80  Reissue 300 150 500 250 600 300  Provisional 200 100 0 0 0 0 0 0  Provisional 200 100 0 0 0 0 0 0 0  2. EXCESS CLAIM FEES  Fee (5) Fee (6) See Fee (6)			See 37 CFR 1.	.27	Art Unit		2616 Confirmation: 1357			
Check Credit Card Money Order None Other (please identify):    X   Deposit Account   Deposit Account Number   O3-1952   Deposit Account Name   Morrison & Foerster LLP	TOTAL AMOUNT OF	PAYMENT	(\$) 120.00	0	Attorney Docke	t No.	44912204880	0		
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Other (e.g., late filing surcharge): 1251 Extension for response within one month 120.00  SUBMITTED BY  Registration No. (Attorney/Agent) 43,148 Telephone (703) 760-7762										
SUBMITTED BY  Signature  Registration No. (Attorney/Agent) 43,148 Telephone (703) 760-7762  Name (Print/Tyrés) Kayin P. Saiyak	Other (e.g., late filing	surcharge): 125	1 Extension	n for rest	onse within or	ne month		17	<sub>0.00</sub>	
Registration No. (Attorney/Agent) 43,148 Telephone (703) 760-7762			10		The min of	.c month		12	0.00	
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	Name (Print/Type) Kevin	R. Spivak			Attorney/Ageni)	70,170				

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## FAX TRANSMISSION

DATE:

August 7, 2006

PTO IDENTIFIER:

**Application Number** 10/048,014

Patent Number

Inventor:

Herbert HEISS

**MESSAGE TO:** 

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**FAX NUMBER:** 

(571) 273-8300

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Attorney Dkt. #:

449122022500

PAGES (Including Cover Sheet): 35

CONTENTS:

Amendment in response to final office action

Substitute Specification

Marked-up Copy of Specification

Petition for Extension of Time (one-month)

Fee Transmittal in duplicate

Transmittal form

Replacement Drawing

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Under the Paparwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. Application No. (if known): 10/048,014 Attorney Docket No.: 449122022500 Certificate of Transmission under 37 CFR 1.8 I hereby certify that this correspondence is being facsimile transmitted to the United States Patent and Trademark Office. August 7, 2006 Date Marilyn Lagios Typed or printed name of person signing Certificate (703) 760-7791 Registration Number, if applicable Telephone Number Note: Each paper must have its own certificate of transmission, or this certificate must identify each submitted paper.

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8300, on August 7, 2006.

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Under the Paperwork Reduction Act of 1995, no persor	ns are required to res	pond to a collection of informat Application Number	lon unless it displays a valid OMB control number 10/048,014					
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FORM	<b>, -</b>	First Named Inventor	<del></del>					
PORIVI		Art Unit	Herbert HEISS					
(to be used for all correspondence after in	nitial filing)	Examiner Name	2616 Conf. No:1357					
			Albert T. Chou					
Total Number of Pages In This Submissio	on l	Attorney Docket Number	449122022500					
ENC	Check all that apply	7)						
X Fee Transmillal Form	Drawing(s)		After Allowance Communication to TC					
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X Amendment/Reply	Petition		Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)					
After Final	Petition to Convert to a Provisional Application		Proprietary Information					
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Express Abandonment Request	Request for F	Refund	Return Receipt Postcard					
Information Disclosure Statement	CD, Number of	of CD(s)						
Certified Copy of Priority Document(s)	Landscape Table on CD							
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Printed name Kevin R. Spivak	5							

Reg. No.

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Date

August 7, 2006